

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 24 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000007815

1. Entity Name

CRYSTAL SANDS ENTERPRISES, L.C.

Principal Place of Business

6760 N. LECANTO HWY.
BEVERLY HILLS FL 34465

Mailing Address

6760 N. LECANTO HWY.
BEVERLY HILLS FL 34465-2598

2. Principal Place of Business

2571 First St.
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 2
Suite, Apt. #, etc.

City & State

FT. MYERS FL

City & State

HERNANDO FL

4. FEI Number

59-3605666

Applied For

Not Applicable

Zip

33901

Country

Lee

Zip

34442

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

STANCZYK, REGINALD
6760 N. LECANTO HWY.
BEVERLY HILLS FL 34465

7. Name and Address of New Registered Agent

Name
STANCZYK, REGINALD

Street Address (P.O. Box Number is Not Acceptable)
1959 W. GARDENIA DR

City
CITRUS SPRINGS

FL

Zip Code
34434

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Reginald Stanczyk
Signature typed or printed name of registered agent and title if applicable.

REGINALD STANCZYK Member

4/24/00
DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☒ Addition
MGRM
STANCZYK, STANLEY J
8800 SW 181 TER
MIAMI, FL 33157

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☒ Addition
MGRM
STANCZYK, REGINALD
1959 W GARDENIA DR
CITRUS SPRINGS, FL 34434

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition
100003245611-2
-05/09/00--01121--014
*****50.00 *****50.00

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Reginald Stanczyk
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

REGINALD STANCZYK

Date

4/24/00

Daytime Phone #

352-465-4720

CR2E083 (9/99)